



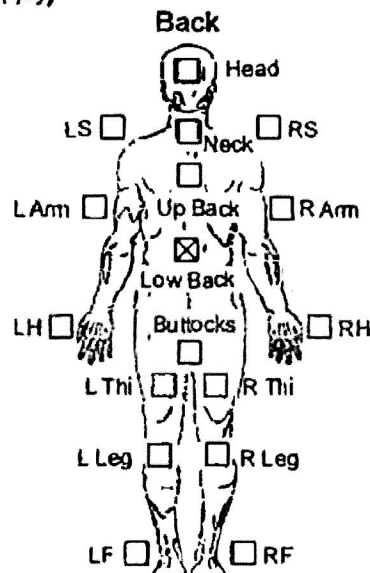
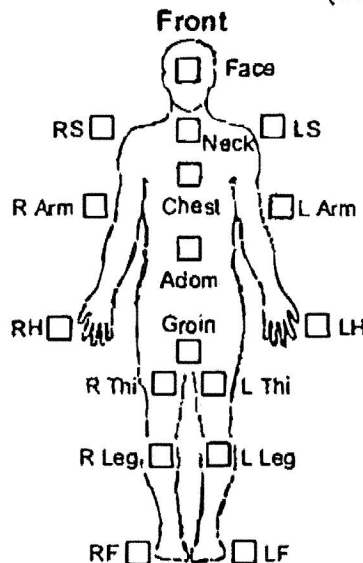
SOLVAY POLICE DEPARTMENT

SUBJECT MANAGEMENT REPORT

Subject's Last Name Sposato		First Name Richard		Middle L	Date of Birth /1961	Age 59	DOB 21-349466
Sex Male	Race White	Ethnicity Non-Hispanic	Height 6' 00"	Weight 250	Impairment? None	Condition of Subject Injured	Subject Hospitalized? No
Subject's Address 510 N. Orchard Rd.			City, State, Zip Solvay, NY 13209			Phone Number (315) 412-1776	
Officer's Last Name Ryan		First Name Matt		Middle W	Age 32	Sex Male	Race White
Ethnicity Non-Hispanic	Height 5' 09"	Weight 205	Condition of Officer Not Injured	Officer Hospitalized? No	Officer Ambushed? No	Did Officer Approach? Yes	Years of Service? 11
Location of Incident (address, city, zip code) 510 N. Orchard Rd. Solvay, 13209			Location Type Residence		Nature of Incident Traffic Stop		Date 06/19/2021
Other Agencies Involved/Present OCSO, Geddes PD, Camillus PD			Directed Threat Towards? Police		Subject Armed? Unkn		Subject Arrested on Criminal Charges? Yes
Description of Injuries: One Taser probe puncture to lower right side of back which the defendant removed himself.							
Type of Force Used							
Verbal Commands <input checked="" type="checkbox"/>		Empty Hand Control <input type="checkbox"/>		Pain Compliance <input type="checkbox"/>			
Carotid Control Hold <input type="checkbox"/>		Baton (Leverage) <input type="checkbox"/>		Baton (Impact) <input type="checkbox"/>			
Chemical Aerosol <input type="checkbox"/>		Firearm (Handgun/Rifle) <input type="checkbox"/>		Taser (Go to page 2) <input checked="" type="checkbox"/>			
Canine <input type="checkbox"/>		Vehicle <input type="checkbox"/>		Other (See narrative) <input type="checkbox"/>			
Narrative: Describe the subject's actions that prompted the police officer to use necessary reactive force. Include the subject's verbal threats, demeanor, level of resistive tension, size, age, skill level, additional suspects, special knowledge or training, weapons used and previous contacts with the subject, etc.							
Defendant failed to yield for an emergency vehicle attempting to conduct a vehicle and traffic stop and then fled the vehicle into his residence, ignoring verbal commands to stop. Defendant is known to police to be resistant from previous encounters.							
Was the use of force effective? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, what factors caused the use of force to be ineffective? (wind, intoxication, drug use, etc.)							
Defendant was only contacted by one probe.							
Civilian Witnesses at scene:							
Name:		Address:		Phone #: () -			
Name:		Address:		Phone #: () -			
Date of Report: 06/19/2021 Time of Report: 0500 Officer's Name: Ryan Unit #: 4301							
Officer's Signature/Shield: <u>[Signature] #0021</u>							
Supervisor's Signature/Rank/Shield: <u>[Signature] 29047</u> Copies to Lieutenant <input checked="" type="checkbox"/>							
Duty Chief Notified: <u>[Signature]</u> Date/Time: <u>06/20/2021</u> Page 1 of 4							

SOLVAY POLICE DEPARTMENT**SUBJECT MANAGEMENT REPORT
TASER USE SUPPLEMENT**

Subject's Last Name: Sposato		First Name Richard		Middle L	Birth /1961	DOB 21-349466
Type of Subject <input checked="" type="checkbox"/> Human <input type="checkbox"/> Animal		TASER Serial Number X13004338		TASER Cartridge Type 25-Ft XP		Cartridge Serial Number
Location of Incident <input checked="" type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Jail <input type="checkbox"/> Hospital		Suspect Under the Influence <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs Specify:				
Reason for Deployment <input type="checkbox"/> Violent Suspect <input type="checkbox"/> Barricaded <input type="checkbox"/> Suicidal <input type="checkbox"/> Warrant <input type="checkbox"/> Suicide by Cop <input type="checkbox"/> Civil Disturbance <input checked="" type="checkbox"/> Other (explain)						
TASER Use (Check one) <input type="checkbox"/> Success <input checked="" type="checkbox"/> Failure		Suspect wearing heaving or loose clothes: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
If the TASER deployment was unsuccessful was a Drive Stun followup used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Number of Air Cartridges fired: 1		Number of cycles applied: 1		Photographs Taken? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Usage (check one): <input type="checkbox"/> Arc Display <input type="checkbox"/> Laser Display <input checked="" type="checkbox"/> TASER Application						
Is this a dart probe contact? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is this a drive stun contact? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Approximate target distance at the time of the dart launch: 20 Feet						
Did dart contacts penetrate the subject's skin? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				Probes removed on scene? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Did TASER application cause injury? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				If yes, was the subject treated for the injury? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**APPLICATION AREAS - Points of contact
(Check all that apply)**Officer's Signature/Shield: *[Signature]* #0024Supervisor's Signature/Rank/Shield: *[Signature]* #9077Duty Chief Notified: *[Signature]* Date/Time: *7:45 PM 2/20/22* Page 2 of 4

SOLVAY POLICE DEPARTMENT**SUBJECT MANAGEMENT REPORT
SUPPLEMENTAL NARRATIVE**

Subject's Last Name	First Name	Middle	Date of Birth	DP#
Sposato	Richard	L	/1961	21-349466

On 6/19/21 at about 0215hrs. while working a marked patrol unit, I attempted to conduct a V&T stop on the defendant, Richard Sposato, for several infractions. I activated my emergency lights and sirens, however the defendant failed to pull over. The defendant then abruptly pulled into a driveway at 510 N. Orchard Rd. and immediately exited his vehicle and ran into the garage via a side entry door. I am familiar with Mr. Sposato due to previous encounters with him in which he is typically resistant to police.

I pursued the defendant into the garage giving him verbal commands to stop and to show me his hands however he continued to flee and attempted to enter the residence through the interior door. I deployed my department issued Taser X26 at the defendants back as he slammed the door closed. Upon gathering the spent Taser cartridge, one probe was still connected to the wire, while the other was missing. Mr. Sposato refused to exit the residence and cooperate with the investigation.

I was able to make contact with him via cell phone in which he continued to be uncooperative and verbally abusive towards patrol. I asked Mr. Sposato if he needed medical attention for anything and he advised that he did not. I asked Mr. Sposato if he was struck by one of the Taser probes and he advised that he was not.

It was later learned via a Facebook post by Mr. Sposato that he was in fact struck by one Taser probe in the lower right back and removed it himself.

Officer's Signature/Shield: *[Signature]* 3247

Supervisor's Signature/Rank/Shield: *[Signature]* 3247

Duty Chief Notified: *[Signature]* Date/Time: 7/20/21 @ 0700 Page 3 of 4

SOLVAY POLICE DEPARTMENT**SUBJECT MANAGEMENT REPORT
SUPPLEMENTAL NARRATIVE**

Subject's Last Name Sposato	First Name Richard	Middle L	Date of Birth [REDACTED] 961	Officer 21-349466
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Officer's Signature/Shield: *Alfred M. [Signature]* 110021Supervisor's Signature/Rank/Shield: *Sgt. [Signature]* 49047Duty Chief Notified: *Det. [Signature]* Date/Time: *29 June 21 @ 0700* Page *1* of *4*